



B-8 Truancy Conference Report

District of Columbia Public Schools

Date of Conference	Time of Conference
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Student Information

Name	DOB	Gender
Home Address	School	Grade
Parent/Guardian Name	Phone (H)	Phone (O)
		Phone (C)

Statement of Problem (attach additional pages as needed)

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Prior Services/Interventions (attach additional pages as needed)

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Meeting Notes (attach additional pages as needed)

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Recommendations/Next Steps (attach additional pages as needed)

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Persons in Attendance (Name and Title)

Name	Title
Name	Title
Name	Title
Name	Title

Signature

Local School Principal Name	Signature	Date
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